

**Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions**

A Public Document

1. Agency Name

City of Dana Point

Division, Department, or Region (if applicable)

Street Address

33282 Golden Lantern

Designated Agency Contact (Name, Title)

Kathy Ward, City Clerk

Area Code/Phone Number

949-248-3505

E-mail

kward@danapoint.org

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Date Stamp

2012 FEB 29 P 5:47

CITY OF DANA POINT

California Form 802

For Official Use Only

☐ Amendment (Must provide explanation in Part 3.)

Date of Original Filing: 2-29-12
(month, day, year)

2. Function, Event, or Ceremonial Role Information

Title OCFA Best & Bravest Awards

Face Value of Each Admission \$ 35.00

Description O.C. Fire Authority Award Dinner

Date(s) 2 / 2 / 12

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: Orange County Fire Authority

Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☐ No ☒ If yes: _____
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization. 	
Weinberg, Steven	2	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public Purpose...see continuation sheet	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>

I have verified that the distribution of admissions, set forth above,

Kathy Ward

City Clerk

2-29-12

Print Name

Title

(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)